EXAMPLE PHYSICIAN STATEMENT FOR US DOS

The Waiver Review Division

Physician's Signature

CA/VO/L/W/, Visa Service
US Department of State
2401 E Street, NW (SA-1)
Washington, D.C. 20226-0006

Dear Sir or Madam:

I am applying for a waiver of the two-year home country requirement. At the time I obtained my J-1 exchange visitor status, I fully intended to honor my two-year home country residence requirement.

However, the U.S. Government has created a new program by which my services can be of value in Health Professional Shortage Area in Washington State. Therefore I have decided to help out serving patients in ______ County, Washington, which has a shortage of primary care providers.

Date